Attorney Docket No. SURGEX- 1

## DECLARATION AND POWER OF ATTORNEY

(Patent, Design or C-I-P Application)

As a below-named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural

the specification of w X is attached heret						(if applicable)	
	have reviewed and understan					ing the claims, as amended by	
I acknowledge the d Code of Federal Reg		which is m	aterial to the exan	nination of this a	application	in accordance with Title 37,	
certificate listed belo before that of the app	on priority benefits under Ti by and have also identified olication on which priority is	below any	ted States Code, §: foreign application	119 of any foreign for patent or in	gn applicat nventor's o	tion(s) for patent or inventor's certificate having a filing date	
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Training the column to the col			DATE OF FILI TION NO. (day, month, ye		- 1	1 (1	
						YES NO	
EISTING OF FORE	IGN APPLICATIONS CON	TINUED (	ON PAGE 2 HERE	EOF: YES	NO <u>x</u>		
subject matter of each first page of Title Code of Federal Re	th of the claims of this applied 35, United States Code,	cation is no §112, I ack	t disclosed in the p nowledge the duty	orior United State to disclose mat	es applicat	isted below and, insofar as the ion in the manner provided by mation as defined in Title 37, tion and the national or PCT	
Application No. Filing Date Status							
POWER OF ATT	ORNEY: As a named in	ventor. I h	ereby appoint the	following attorr	ev(s) and	or agent(s) to prosecute this	
application and trans	act all business in the Patent	and Trader	nark Office connec	ted therewith.		, r	
ERIC A. LaMORT	ГЕ, Reg. No. 34,653; MARY	ALICE McN	IONAGLE, Reg. No	o. 41,187			
SEND CORRESPONDENCE TO:  LaMORTE & ASSOCIATES, P.C.  P.O. BOX 434  Yardley, PA 19067-8434				DIRECT TELEPHONE Eric A. LaMorte. Esq. CALLS TO: (215) 321-6772			
FULL NAME OF INVENTOR #1	LAST NAME: McCOOK		FIRST NAME: MICHAEL		MIDDL	E INITIAL:	
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FULL NAME OF INVENTOR #2	LAST NAME: BENTON		FIRST NAME: ANDREW		MIDDLE NAME:		
RESIDENCE & CITIZENSHIP	CITY: FLEMINGTON		STATE OR FOREIGN COUNTRY: NEW JERSEY		i i	TRY OF CITIZENSHIP: TED KINGDOM	
POST OFFICE ADDRESS	POST OFFICE ADDRESS: 124 THATCHERS HILL ROAD		CITY: FLEMINGTON		ŧ	AND ZIP CODE: W JERSEY 08822	
I ISTING OF INVE	 NTORS CONTINUED ON	PAGE 2 H	EREOF: YES	NO X	I		
LISTING OF INVE							
I hereby declare that are believed to be to made are punishable	rue; and further that these s by fine or imprisonment, or	statements vor both, unc	vere made with the ler Section 1001 of	e knowledge that Title 18 of the	t willful fa	made on information and belief alse statements and the like so ates Code and that such willful	
I hereby declare that are believed to be to made are punishable	rue; and further that these s by fine or imprisonment, of jeopardize the validity of th	statements vor both, unc	vere made with the ler Section 1001 of n or any patent issu	E knowledge that Title 18 of the ring thereon.	t willful fa	alse statements and the like so	

Date:

1-4-02

Signature of Inventor #2

Date: